
	<b>State of Rhode Island and Providence Plantations</b> <b>Office of the Secretary of State</b>  Corporations Division 148 W. River Street Providence, Rhode Island 02904-2615 Telephone: (401) 222-3040	Fee: \$150.00   <a href="#">LOGOUT</a>
<b>Limited Liability Company Articles of Organization</b> <div style="text-align: right;">  Help with this form                 </div>		
(Chapter 7-16-6 of the General Laws of Rhode Island, 1956, as amended)		
<b>ARTICLE I</b>		
The name of the limited liability company is: <u>Pisaturo Real State, LLC.</u>		
<b>ARTICLE II</b>		
The street address (post office boxes are not acceptable) of the limited liability company's registered agent in Rhode Island is:		
No. and Street:	<u>30 Station Street</u> <u></u>	
City or Town:	<u>Warwick</u>	State: <u>RI</u> Zip: <u>02886</u>
The name of the resident agent at such address is: <u>Joseph Pisaturo</u>		
<b>ARTICLE III</b>		
Under the terms of these Articles of Organization and any written operating agreement made or intended to be made, the limited liability company is intended to be treated for purposes of federal income taxation as: <i>Check one box only</i>		
<input checked="" type="radio"/> a partnership <input type="radio"/> a corporation <input type="radio"/> disregarded as an entity separate from its member		
<b>ARTICLE IV</b>		
The address of its principal office of the limited liability company if it is determined at the time of organization:		
No. and Street:	<u>30 Station Street</u> <u></u>	
City or Town:	<u>Warwick</u>	State: <u>RI</u> Zip: <u>02886</u> Country: <u></u>
<b>ARTICLE V</b>		
The limited liability company has the purpose of engaging in any lawful business, unless a more limited purpose is set forth in Article VI of these Articles of Organization.		
The period of its duration is: <input checked="" type="radio"/> Perpetual <input type="radio"/> <u></u> (mm/dd/yyyy)		

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**ARTICLE VI**

Additional provisions, if any, not inconsistent with law, which members elect to have set forth in these Articles of Organization, including, but not limited to, any limitation of the purposes or any other provision which may be included in an operating agreement:

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**ARTICLE VII**

The limited liability company is to be managed by its ☒ Members or ☐ Managers (check one)  
 (If managed by Members, go to ARTICLE VIII)

The name and address of each manager (If LLC is managed by Members, DO NOT complete this section):

Delete	Name	Address
		Address, City or Town, State, Zip Code, Country
<input type="checkbox"/>		

First Name:  Middle Name:  Last Name:  Suffix:   
 Address:  City:  State:  Zip:  Country:

**ARTICLE VIII**

The date these Articles of Organization are to become effective, not prior to, nor more than 30 days after the filing of these Articles of Organization.

Later Effective Date:   (mm/dd/yyyy)


**Filer's Contact Information**

(Enter a contact name, mailing address and email.)

Contact Name:

Business Name:

No. and Street:

☐ - Same Address as - 

City or Town:

State:

Zip:

Country:

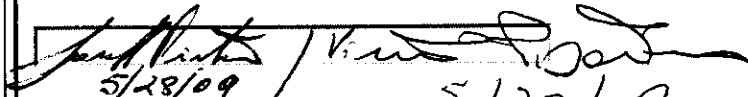
Contact Phone:  ext:

Contact Email:

Please provide an email address to receive an expedited response from the Corporations Division if the filing is rejected for any reason. If no email address is provided, correspondence from the Division will be sent by mail.

*This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

**Signed this 28 Day of May, 2009 at 9:42:58 AM by the Authorized Person.**

  
5/28/09 5/28/09  
**Address of Authorized Signer:**

By selecting ACCEPT you hereby acknowledge that this  
electronic document is submitted in compliance with R.I.  
Gen. Laws § 7-16. You hereby agree that any legal issues  
or causes of action arising from the submission of this

☐ Accept

☐ Decline

[Click HERE to Submit This Information](#)

Form No. 400  
Revised 09/07

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